

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G21521

1. Entity Name

HOCH AND SONS INCORPORATED

FILED
Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90100 017 ***150.00

Principal Place of Business

Mailing Address

2908 LAKESHORE DR.
 TALLAHASSEE FL 32312

2908 LAKESHORE DR.
 TALLAHASSEE FL 32312

2. Principal Place of Business

3. Mailing Address

3607 Westmoreland Drive

3607 Westmoreland Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Tallahassee, FL

Tallahassee, FL

Zip
32303Country
LeonZip
32303Country
Leon

4. FEI Number 59-2255624

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOCH, JAMES A
 2908 LAKESHORE DRIVE
 TALLAHASSEE FL 32312

Name HOCH, James A.

Street Address (P.O. Box Number is Not Acceptable)

3607 Westmoreland Drive

City Tallahassee

FL

Zip Code

32303

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
 NAME HOCH, JOAN E ☐ Delete
 STREET ADDRESS 2908 LAKESHORE DR.
 CITY-ST-ZIP TALLAHASSEE FL 32312-2112

TITLE VP
 NAME HOCH, JAMES A ☐ Delete
 STREET ADDRESS 2908 LAKESHORE DR.
 CITY-ST-ZIP TALLAHASSEE FL 32312-2112

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE P ☒ Change ☐ Addition
 NAME HOCH, JOAN E
 STREET ADDRESS 3607 Westmoreland Drive
 CITY-ST-ZIP Tallahassee, FL 32303

TITLE VP ☒ Change ☐ Addition
 NAME HOCH, James A.
 STREET ADDRESS 3607 Westmoreland Drive
 CITY-ST-ZIP Tallahassee, FL 32303

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #